## BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: P.O. Box 747 %Falls Church, Virginia 22040-0747
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FOLLOWING

Page 1 of 2

## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if pural inventors are named below) of the subject matter which is claimed and for which a patient is sought on the invention entitled record and the property of the purple of the pur

Insert Title:	DEVICES USING THE SAME									
Fill in Appropriate	the specification of which is attached hereto. If not attached hereto, the specification was filed onas									
Information - For Use Without	Their of Chaten Application Number									
Specification	and amended on(if applicable) and/or									
Attached:	the energification was filed on as PCT									
	International Application Number and was									
	amended under PCT Article 19 on									
The state of the s	I horeby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, II 56.  I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this period of the state of the state of one aske in the United States of America more than one year prior to the supplication that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application any country foreign to the United States of America on an application filed by my large presentative or assigns more than twelve months (sk months for designs) prior to this application, and that no application repatent or inventor's certificate on this invention has been filed in any country foreign to the United States of America more prior to this application by me or my legal representatives or assigns accept as follows:  I hency could be a supplication for the prior to this application for the prior to the prio									
řū										
4.7	Thereby claim foreign priority benefits under Title 35, United States Code,   19(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:									
	Prior Foreign Appl		-			Priority C	laimed			
Insert Priority	riioi roieigii Appi			3	21 2000		_			
Information:	2000-51239	Korea			31, 2000	X				
(Happropriate)	(Number)	(Country)		(Month/Day	y/Year Filed)	Yes	No			
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ring				04-11-17	/// Till - IV	Yes	No			
	(Number)	(Country)		(Month) Day	y/Year Filed)					
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	(Number)	(Country)			y/Year Filed)	Yes	No			
	I hereby claim the benefit under Title 35, United States Code, 🗆 19(e) of any United States provisional applications(s) listed below									
Insert Provisional Application(s): (if any)	(Application Numbe	r)		(Filing I	Oate)					
	(Application Number) (Filing Date)									
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:									
	Country		Application Number		Date of Filing (Moz	nth/Day/Year)				
Insert Requested Information:										
(if appropriate)	I hereby claim the benefit under Title 35, United States Code, D 20 of any United States and/or PCT application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 25, United States Code, D 12, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, D 36 which became available between the filling date of the prior application and the national or PCT international filling date of the application.									
insert Prior U.S. Application(s): (if any)	(Application Number)		(Filing Date)	Date) (Status -		atented, pending, abandoned)				
	(Application Number	er)	(Filing Date)		(Status - patented,	pending, abandor	ned)			

Attorney Docket No.

I hereby appoint the following attorneys to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Raymond C. Stewart	(Reg. No. 21,066)	Terrell C. Birch	(Reg. No. 19,382)
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Send Correspondence to:

## BIRCH, STEWART, KOLASCH & BIRCH, LLP or Customer No. 2292

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and a continuous statement of the continuous statements and that the statement is and the statement is an expectation of any st

such willful laise statements may jeopatuize tie va	muny of the apparation of any pure							
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
Il Gun KWON	now		vool.8. 13					
Residence (City, State & Country)	CITIZENSHIP							
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POST OFFICE ADDRESS (Complete Street Address)	ess including City, State & Country	)						
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
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Residence (City, State & Country)		CITIZENSHI	P					
POST OFFICE ADDRESS (Complete Street Addr	ress including City, State & Country	)						
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
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Residence (City, State & Country)		CITIZENSHI	IP					
POST OFFICE ADDRESS (Complete Street Address including City, State & Country)								
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Address

Fell Name of Societal
Inventor, if any,
say above

Inventor, if any

Full Name of Fourth Inventor, if any: see above

Full Name of Fifth Inventor, if any: see above